



Government of the
District of Columbia

2015

D-41ES Estimated Payment for Fiduciary Income Tax



This is a FILL-IN format. Please do not handwrite any data on this form other than your signature.

Quarterly payment
(dollars only)

\$

.00

Estate or trust's federal employer ID number

Estate or trust's social security number

OFFICIAL USE ONLY
Vendor ID#0002

Estate or trust name

Tax period ending (MM/YY)

Fiduciary's name and title

Fiduciary's address (number, street and apartment/suite #, if applicable)

City

State

Zip Code + 4

Voucher number:

Due date: